

MICHIGAN'S TITLE XXI PLAN SUMMARY FACT SHEET

Name of Plan:	MIChild
Date of Plan Submitted:	December 29, 1997
Date Plan Approved:	April 7, 1998
State Plan Effective Date:	May 1, 1998
Date Amendment #1 Submitted:	April 16, 1998
Date Amendment #1 Approved:	June 29, 1998
Date Amendment #1 Effective:	May 1, 1998
Date Amendment #2 Submitted:	December 21, 1998
Date Amendment #2 Approved:	March 31, 1999
Date Amendment #2 Effective:	January 1, 1999
Date Amendment #3 Submitted:	May 28, 1999
Date Amendment #3 Approved:	August 27, 1999
Date Amendment #3 Effective:	June 28, 1999
Date Amendment #4 Submitted:	May 30, 2000
Date Amendment #4 Approved:	November 7, 2000
Date Amendment #4 Effective:	July 1, 2000
Date Amendment #5 Submitted:	August 13, 2001
Date Amendment #5 Approved:	November 14, 2001
Date Amendment #5 Effective:	July 1, 2001
Date Amendment #6 Submitted:	December 20, 2003
Date Amendment #6 Approved:	February 21, 2003
Date Amendment #6 Effective:	July 1, 2002
Date Amendment #7 Submitted:	January 9, 2003
Date Amendment #7 Approved:	April 17, 2003
Date Amendment #7 Effective:	December 1, 2002

Background

- On December 29, 1997, Michigan submitted a Title XXI State plan in order to implement a new State Child Health Insurance Program called "MIChild." The program was implemented on May 1, 1998, and provided coverage to children under age 19 in families with incomes up to 200 percent of the Federal poverty level (FPL).

- Prior to May 1, 1998, Michigan's Medicaid program provided coverage to pregnant women and infants up to age 1 in families with incomes at or below 185 percent of the FPL and all children ages of 1-15 up to 150 percent of the FPL.

Amendments

- On April 6, 1998, Michigan submitted an amendment to its Title XXI State plan in order to expand Medicaid eligibility to children 16 through 18 years of age in families with incomes through 150 percent of FPL; reduce premiums and eliminate copayments; require final eligibility determinations to be made by State staff, and establish a 12-month lock-in to health plans.
- On December 21, 1998, Michigan submitted an amendment to its Title XXI State plan in order to remove sterilization and infertility treatments as covered services and to revise the open enrollment policy.
- On May 28, 1999, Michigan submitted an amendment to its Title XXI State plan in order to establish that abortions are covered under the program only when determined medically necessary to save the life of the mother.
- On May 30, 2000 Michigan submitted an amendment to its Title XXI State plan in order to allow self-declaration of income and modify the reenrollment process.
- On August 13, 2001, Michigan submitted an amendment to its Title XXI State plan in order to clarify technical language, eliminate the open enrollment periods, allow families to explain changes in income or family size before disenrolling for failure to pay, initiate the exemption to premiums for American Indians/Alaska Natives, and initiate collection of ethnicity and primary language data.
- Michigan submitted its sixth amendment on December 20, 2002, to update and amend its SCHIP state plan to indicate the State's compliance with the final SCHIP regulations.
- On January 9, 2003, Michigan submitted an amendment to its Title XXI State plan to add coverage for unborn children with family incomes up to and including 185 percent of the FPL and not eligible for Medicaid. Coverage will include prenatal care and associated health services for children from conception through birth.

Children Covered Under the Program

- The State reported that 71,882 children were ever enrolled in the program during Federal fiscal year 2002.

Administration

- Michigan has a single administrative contractor that is responsible for most MICHild administrative duties. Final eligibility determination is made by State staff. The

Administrative Contractor is responsible for interacting with the medical benefits providers and the State Department of Community Health.

Health Care Delivery System

- Michigan has multiple managed care providers offering MICHild medical benefits. Licensed insurers that offer a preferred provider product and HMOs may choose to contract with the State at any time, provided that all the State standards are met.

Benefit Package

- The benefit package for MICHild is the same as the State employee benefit package. The benefit package is a comprehensive benefit package that includes a variety of hospital and physician services.

Cost Sharing

- Michigan does not impose any copayments.
- Michigan charges premiums for children in families with incomes between 151 and 200 percent of the FPL. The premium is \$5 a month regardless of the number of children in the family. Families with members who are American Indians and Alaska Natives are exempt from the premium payment.

State Action to Avoid Crowd Out

- The MICHild application form includes a request for information regarding other insurance coverage for each child. The contractor does not enroll any child who has creditable group health coverage or any child who has dropped coverage in the previous 6 months, unless the reason for dropping the coverage is approved by the State. Families that have employer-sponsored coverage available to them, but who are not availing themselves of this coverage, are not enrolled in MICHild.

Coordination Between SCHIP and Medicaid

- Michigan uses a single application, and children who are found eligible for Medicaid are enrolled in Medicaid. A child who is eligible for Medicaid is ineligible for MICHild.
- State eligibility workers are available at the time of the Administrative Contractor's review to determine if the child is Medicaid or MICHild eligible.

Outreach Activities

- The State's marketing and outreach effort is comprised of three components: general marketing through the use of demographically targeted media campaigns and existing information dissemination channels (demographic targeting maximizes the return for

advertising dollars by matching the timing and placement of advertisements to the habits of the target population) and the solicitation of cooperation and outreach from programs/agencies/systems/associations likely to have contact with target families.

Financial Information

Total FFY 2003 SCHIP Allotment – \$95,696,032

Enhanced Federal Matching Rate – 68.79%

Date Last Updated by: CMS, CMSO, FCHPG, DSCHIP, June 26, 2003